WASHINGTON STATE BOARD OF PHARMACY
AUTOMATED DRUG DISTRIBUTION DEVICES
REVIEW FORM

For Review by Protocol Applicant and Board
WAC 246-871-050(7)

Date: _____
Responsible Pharmacist: _____
Description of Device: _____
Pharmacy: _____
Patient Facility: _____

There are signed policies and procedures that include the following:

	Yes	No	Comments
Listing of all medications with their strength and quantity. All drugs stored in device must be labeled with drug name, strength, lot number, expiration date and, if applicable, instructions for use.			
Security procedure for all personnel with access. a. Pharmacist will be responsible for determining who will have access to device. Only personnel authorized to administer medications shall be granted access to the device. b. Pharmacist will provide password to authorized users. Passwords must be under each user's control. Passwords must be changed at least quarterly.			
Documentation of drug removal and return. a. The device shall produce a record of each transaction. The record shall document the name, strength and quantity of the drug removed/returned; name and location of the patient; time of removal/return; and identity of the individual removing/ returning the drug. b. An individual removing a medication from the device shall be responsible for verifying the medication count.			

	Yes	No	Comments
Compliance with controlled substance regulations. a. Controlled substances stored in an automated device do not need to be counted at the end of each shift, however, a full count must be made at least two times per week. The times the count occurs should vary at the direction of the responsible pharmacist. b. All controlled substance discrepancies that occur during a shift must be resolved before the end of the shift by the charge nurse or designee. Any unresolved discrepancy requires notification of the pharmacy and the generation of an occurrence report.			
Maintenance of the drug inventory. a. Pharmacy will check the device for outdated medication at least monthly. b. Authorized personnel, i.e. intern, pharmacy technician, or pharmacist, will restock the device under the supervision of the responsible pharmacist.			
Daily verification of patient census. The names of discharged and deceased patients shall be removed within 12 hours.			
Resolution of drug discrepancies. The responsible pharmacist shall review all reports of drug inventory discrepancies. A quality assurance report shall be generated for each discrepancy.			
Pharmacist drug documentation and control. The responsible pharmacist is ultimately responsible for control of all medications stored in the device.			

	Yes	No	Comments
Device specifications and proposed locations. The pharmacy shall provide the name and serial number of the device and the location of the device within the facility.			
Manual operation in case of system failure. a. The pharmacy shall have a procedure for manually operating the device in case of system failure. b. Procedures shall require the identification of the patient by name, date of birth, and the identification of any allergies.			
Pharmacy shall develop a quality assurance program. a. Timely inventory review to remove soon to expire drugs; b. Periodic review of drug usage reports by the pharmacist, nurse and physician; c. Monthly review of drug inventory discrepancies.			

Comments: _____

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FOR STAFF USE ONLY

Staff Recommendation: Acceptance _____ Revision Needed _____ Board Agenda _____

Date Approved by Board _____ Investigator Notified _____